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PTO/SB/21 (modified)
Approved for use through xx/xx/xx, OMB 0651-0031

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

0001/PTO Rev. 10/95	U.S. Department of Commerce Patent and Trademark Office		Application Number	09/459,493
			Filing Date	December 13, 1999
			First Named Inventor	Moshe Rubin
			Group Art Unit Number	2787
			Examiner Name	Not yet known
Total Number of Pages in This Submission		3	Attorney Docket Number	21939-04693

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(to be used for all correspondence during pendency of filed application)

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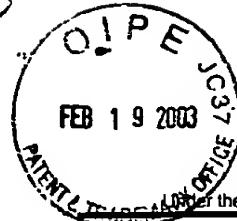
SIGNATURE OF ATTORNEY OR AGENT

Signature:	<i>Laura Majer</i>		
Attorney/Reg. No.:	Laura A. Majerus, Registration No. 33,417	Dated:	February 07 2003

CERTIFICATE OF MAILING

I hereby certify that this correspondence, including the enclosures identified above, is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner for Patents, Washington, D.C. 20231 on the date shown below. If the Express Mail Mailing Number is filled in below, then this correspondence is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service pursuant to 37 CFR 1.10.			
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Signature:	<i>Laura Majer</i>		
Typed or Printed Name:	Laura A. Majerus	Dated:	February 07 2003



PTO/SB/83 (03-02)
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REQUEST FOR WITHDRAWAL AS ATTORNEY OR AGENT

Application Number	09/459,493
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First Named Inventor	Moshe Rubin
Group Art Unit	2787
Examiner Name	Not yet known
Attorney Docket Number	21939-04693

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To: Assistant Commissioner for Patents
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I hereby apply to withdraw as attorney or agent for the above identified patent application.

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All patents and patent applications owned by Alchmedia have been sold to Finjan Software, Ltd. and Fenwick & West's files have been transferred to Finjan's attorneys.

- The correspondence address is NOT affected by this withdrawal.
- Change the correspondence address and direct all future correspondence to:

Firm or Individual Name	Marc Sockol Squire, Sanders & Dempsey L.L.P.				
Address	600 Hansen Way				
City	Palo Alto	State	California	Zip	94304-1043
Country	United States				
Telephone	(650) 856-6500	Fax	(650) 843-8777		

This request is made on behalf of myself and
 all the attorneys/agents of record,
 the attorneys/agents (with registration numbers) listed on the attached paper(s), or
 the attorneys/agents associated with Customer Number _____

on whose behalf I have signed this request and on whose behalf I am authorized to sign. The request is enclosed in triplicate (including any attachments).

Name	Laura Majerus
Signature	Laura Maj
Date	02/07/03

NOTE: Withdrawal is effective when approved rather than when received.
Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.

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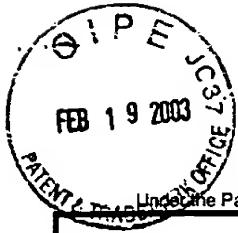
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Name	Laura Maierus
Signature	Laura Maierus
Date	02/07/03

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